								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO)		10	, 210	20.	
										<u>د/</u>	168	-233	
CLAIMS AS FILED - PART (Column 1)						(Column 2)			SMALL ENTITY		OTHER THAN		
TOTAL CLAIMS			28		s ,			RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEI	 	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			28 minus 20=		٠ \			X\$ 9=		OR	X\$18=	144	
INDEPENDENT CLAIMS			minus 3 =		2			X40=		OR	X80=	1/0	
MUI	TIPLE DEPEN	IDENT CLAIM PI	RESENT			+13				1	+270=	160	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR OR		1011	
CLAIMS AS AMENDED - PART II								IOIAL		IOH		1,014	
1	(Column 1) (Column 2) (Column 3)								ENTITY	OR	OTHER SMALL I		
MENDMENTA		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
IDME	Total	AMENDMENT	Minus	+=	FOR	=		X\$ 9=	ree	OR	X\$18=	FEE	
AME	Independent		Minus	***		=		X40=		OR	X80=		
T_{ij}	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+270=		
								+135=	e to discount course	es e marco	TOTAL		
3-4			ADDIT. FEE		OR	ADDIT. FEE							
		(Column_1) CLAIMS		(Colu		(Column 3)	۱ ۲		ADDI-			ADDL	
MENT B		REMAINING NUME AFTER PREVIO AMENDMENT PAID		OUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE		
NOW I	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=		
15 L	Independent	• 1	Minus	***		<u> </u>		X40=		OR	X80=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEPENDEN		CLAIM		J	+135=	i i sa i i i i i i i i i i i i i i i i i	OR	+270=		
,							ı	TOTAL		ام	TOTAL		
			ADDIT. FEE			ADDIT. FEE							
		(Column 1) CLAIMS	1	(Colui		(Column 3)	١.		,				
ENT C		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	**		=] [X\$ 9=		OR	X\$18=	ï	
ME	Independent	•	Minus	***		=		X40=			X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
+135= .* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												i	
		nber Previously Pai					er fou	ınd in the ap	propriate box	k in col	umn 1.		